

INDIVIDUAL DEVELOPMENT PLAN	1. NAME OF EMPLOYEE		2. PERIOD COVERED		PAGE			
			FROM	TO	OF			
INSTRUCTIONS: Prepare original and two. White for employee. Yellow for supervisor. Pink for Employee Development Officer. Item 6 should be in the following priorities: 1) Self-development; 2) On-the-job training; and 3) Formal training. Use additional sheets if necessary.	3. DEPARTMENT/DIVISION		4. POSITION TITLE AND SERIES			5. GRADE		
6. TYPE OF TRAINING	7. SOURCE OF TRAINING	8. PURPOSE	9. DATE SCHEDULED	10. DATE COMPLETED	11. NO. HOURS	12. ESTIMATED COST		
						Tuition	Per Diem	Travel
SIGNATURE OF EMPLOYEE	DATE SIGNED	SIGNATURE OF SUPERVISOR	DATE SIGNED	APPROVED BY (if applicable)			DATE SIGNED	